

# Penilaian keterampilan bedah mikro menggunakan modifikasi pompa aliran pulsatil pada model paha ayam = Microsurgical skills assessment using modified pulsatile flow pump on chicken thigh model

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## Abstrak

Pendahuluan. Sebelum berhadapan dengan pasien yang nyata, seorang ahli bedah plastik pemula berupaya meningkatkan ketrampilan dengan berlatih pada model. Penelitian ini mengimplementasikan metode pelatihan berbasis wet-lab menggunakan perfusi ke a.femoralis ayam untuk mengevaluasi peningkatan keterampilan mikro.

Metode. Dua puluh satu residen bedah plastik (wanita n = 14 (66,7%) dan laki-laki n = 7 (33%)) tanpa pengalaman mikro sebelumnya direkrut dalam penelitian ini. Menjalani serangkaian pelatihan, yang terdiri dari satu sesi kognitif dan lima sesi berbasis keterampilan melakukan anastomosis térimo-terminal arteri femoralis ayam dengan diameter 2 mm. Pre dan post test dinilai menggunakan University of Western Ontario Microsurgical Assessment (UWOMSA). Sesi keterampilan yang direkam pada video, dan dinilai oleh konsultan mikro sebagai evaluator tunggal. Penelitian ini terbatas untuk arteri end-to-end anastomosis. Hasil. Dari total 42 video termasuk 21 modul simpul-mengikat dan 21 modul anastomosis. Median pre-test skor UWOMSA adalah 23 tapi tidak ada subjek yang berhasil mencapai skor maksimal 30. Skor median post-test adalah 27,5 (hampir 5 poin perbaikan, P = 0,0) dan 2 subyek mencapai skor 30. Nilai rata-rata waktu yang dihabiskan untuk menyelesaikan prosedur anastomosis juga lebih cepat dari 41,86 menjadi 34,14 menit (P = 0,01).

Kesimpulan. Menerapkan pelatihan yang diusulkan akan meningkatkan keterampilan pemasangan anastomosis.

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Background. Before entering real clinical setting, a novice plastic surgeon will benefit from repetitive training on non-living models. This study implements the bench-top training method using perfused chicken thigh model to evaluate improvement in microsurgical skills.

Methods. Twenty-one plastic surgery residents (women n=14 (66.7%) and men n=7 (33%)) with no prior microsurgical experience were recruited in this study. They underwent a set of training, consisting of one cognitive session and five skill-based sessions performing the end-to-end anastomosis using chicken femoral artery with a diameter of 2 mm. They were assessed using the University of Western Ontario Microsurgical Skills Assessment (UWOMSA) scoring system at the first skill session and re-evaluated at the fifth skill session. The skill sessions are recorded on video, blinded, and assessed by a consultant microsurgery as a single evaluator. The study was limited to arterial end-to-end anastomosis.

Results. Forty-two videos were reviewed, including 21 knot-tying sessions and 21 anastomoses. The median pre-test UWOMSA score was 23 but none of the subjects managed to reach the maximal score of 30. The median post-test results were 27.5 (almost 5 points improvement, P=0.0) and 2 subjects achieved a score of 30. The average time spent to accomplish the full anastomosis procedure was also reduced from 41.86 to 34.14 minutes (P=0.01).

Conclusion. Using the proposed training skill-based session will improve the subject's microvascular

anastomosis skill.